

# The effect of oral caffeine intake on the perceived wakefulness in individuals with and without ADHD

*Scientific Writing Exercise*

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## Summary

The paradoxon that caffeine has no effect or even decreases wakefulness is commonly described by Attention Deficit Hyperactivity Disorder (ADHD) patients as well as some healthy individuals. Paradoxical effects of caffeine in disorders of the dopaminergic / noradrenergic systems, like ADHD, may hint at non-stimulatory interactions of caffeine in these systems or adjacent neuronal pathways. We found a statistically significant difference in the effect of caffeine intake on the perceived wakefulness of ADHD patients and healthy individuals using a double-blind placebo-controlled trial, showing no mean increase in perceived wakefulness for ADHD patients. These findings lay the ground work for molecular investigations into the interactions of caffeine and the dopaminergic / noradrenergic systems, especially in disorders involving these neuronal pathways, and may even contribute to further our understanding of the biochemical basis of these disorders on a neurological level.

## Introduction

ADHD is one of the most widespread neurodevelopmental disorders worldwide. (Abdelnour et al., 2022-09/2022-10) The current hypothesis for the neurobiochemical basis of ADHD is a dysregulation of the dopamine / noradrenalin levels in certain brain regions like the prefrontal cortex, leading to executive dysfunction and other associated symptoms. (Purper-Ouakil et al., 2011) This is where the

21 first-line treatment option of stimulant medication takes effect by increasing the  
22 levels of the affected neurotransmitters to physiological normal levels. (Mechler  
23 et al., 2022)

24 Caffeine is the most widely consumed psychoactive drug worldwide and belongs,  
25 just like most ADHD medication, to the category of stimulants. (Ferré, 2013) This  
26 leads to many ADHD patients as well as individuals with undiagnosed ADHD to  
27 self-medicate with caffeine, as it has an overlapping effect spectrum with com-  
28 monly prescribed ADHD medication. (Ágoston et al., 2022)

29 Paradoxically many ADHD patients (some healthy individuals as well) experi-  
30 ence no increased wakefulness or even a tiring effect of caffeine. (“Why Does  
31 Coffee Make You Tired?” 2021) One proposed hypothesis for this paradoxical  
32 effect is that the stimulating effect of caffeine decreases the neurotransmitter  
33 imbalance present in ADHD patients, decreasing self-stimulating behaviour like  
34 racing thoughts or hyperactivity, promoting calmness and as a result tiredness.  
35 (Consulting, 2023)

36 However besides hypotheses, the paradoxical effects of caffeine in individuals  
37 with ADHD remain poorly understood and could not be proven until now. Here  
38 we show, using a randomized double-blind placebo-controlled trial, that ADHD  
39 patients do not show statistically significant increased alertness from caffeine  
40 consumption, while healthy individuals do. These findings will help understand

41 the neurobiochemical basis of ADHD and further our understanding on why and  
42 how stimulant medication can be used to alleviate ADHD symptoms.

## 43 **Methods**

## 44 **Results**

45 To investigate a possible correlation between the neurobiochemistry of ADHD  
46 and the effect of caffeine on perceived wakefulness, we recruited twelve  
47 healthy individuals and twelve individuals diagnosed with ADHD. Both groups  
48 were equally split into a group that was administered 30 mg of caffeine in the  
49 form of coffee and a group that was given the same amount of decaffeinated  
50 coffee, minimizing the possible effects of other compounds on our measured  
51 parameter.

52 Our measurements revealed a significant correlation between caffeine intake  
53 and perceived wakefulness in healthy individuals (average increase of 30%,  
54  $p = 0.005$ ) while not showing any significant differences for the group of ADHD  
55 patients (no increase / decrease,  $p = 0.81$ ) as shown in Figure 1. This has also  
56 been corroborated by previous studies. (Leon, 2000)

57 In summary, we found that neurotypical individuals display a significant stimula-  
58 tory response to oral caffeine consumption while individuals with ADHD did not  
59 show signs of increased wakefulness after intake of 30 mg of caffeine.

## 60 **Discussion**

## 61 **Acknowledgements**

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## 65 **Declaration of Interests**

66 The authors declare no competing interests.

## 67 **Author Contributions**

68 Conceptualization, T.N.; Methodology, T.N.; Formal Analysis, T.N.; Investigation,  
69 T.N.; Writing – Original Draft, T.N.; Writing – Review & Editing, T.N.; Project  
70 Administration, T.N.; Funding Acquisition, T.N.

## 71 **Figures**

## 72 **References**

73 Abdelnour, E., Jansen, M.O., Gold, J.A., 2022-09/2022-10. [ADHD Diagnostic](#)  
74 [Trends: Increased Recognition or Overdiagnosis?](#) Missouri Medicine 119,  
75 467.

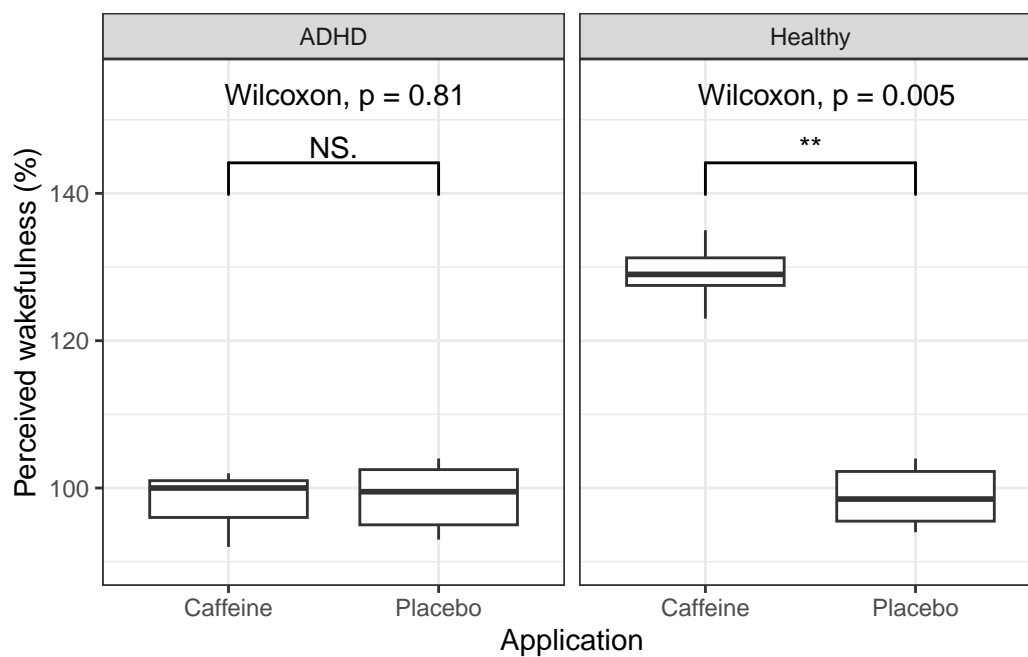


Figure 1: Effect of oral caffeine intake on the perceived wakefulness of healthy individuals and ADHD patients. Caffeine group was administered 30 mg of caffeine in form of coffee. Placebo group was administered decaffeinated coffee. 100% perceived wakefulness corresponds to normal wake alertness. Twelve individuals in each health status group. Six individuals per application. NS. = Not significant ( $P > 0.05$ ); \*\* = Significant ( $P \leq 0.01$ )

76 Ágoston, C., Urbán, R., Horváth, Z., van den Brink, W., Demetrovics, Z., 2022.  
 77 Self-Medication of ADHD Symptoms: Does Caffeine Have a Role? *Frontiers*  
 78 in *Psychiatry* 13. <https://doi.org/10.3389/fpsyt.2022.813545>  
 79 Consulting, E.E., 2023. Why Does Coffee Make Me Sleepy: ADHD & Caffeine.  
 80 Effective Effort Consulting.  
 81 Ferré, S., 2013. Caffeine and Substance Use Disorders. *Journal of Caffeine*  
 82 *Research* 3, 57–58. <https://doi.org/10.1089/jcr.2013.0015>  
 83 Leon, M.R., 2000. Effects of caffeine on cognitive, psychomotor, and  
 84 affective performance of children with Attention-Deficit/Hyperactivity Dis-  
 85 order. *Journal of Attention Disorders* 4, 27–47. [https://doi.org/10.1177/](https://doi.org/10.1177/108705470000400103)  
 86 [108705470000400103](https://doi.org/10.1177/108705470000400103)  
 87 Mechler, K., Banaschewski, T., Hohmann, S., Häge, A., 2022. Evidence-  
 88 based pharmacological treatment options for ADHD in children and  
 89 adolescents. *Pharmacology & Therapeutics* 230, 107940. [https:](https://doi.org/10.1016/j.pharmthera.2021.107940)  
 90 [//doi.org/10.1016/j.pharmthera.2021.107940](https://doi.org/10.1016/j.pharmthera.2021.107940)  
 91 Purper-Ouakil, D., Ramoz, N., Lepagnol-Bestel, A.-M., Gorwood, P., Si-  
 92 monneau, M., 2011. Neurobiology of Attention Deficit/Hyperactivity  
 93 Disorder. *Pediatric Research* 69, 69–76. [https://doi.org/10.1203/PDR.](https://doi.org/10.1203/PDR.0b013e318212b40f)  
 94 [0b013e318212b40f](https://doi.org/10.1203/PDR.0b013e318212b40f)  
 95 Why Does Coffee Make You Tired?, 2021. Sleep Foundation.